

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	702255	10-29-99
O.I.P.E. CLASSIFIER		48	10/21/99
FORMALITY REVIEW		(64117)	10-25-99
			11-16-99

INDEX OF CLAIMS

✓ Rejected
 II Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	Original
1	8/1
2	8/1
3	8/1
4	8/1
5	8/1
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49	8/1
50	8/1

Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions
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